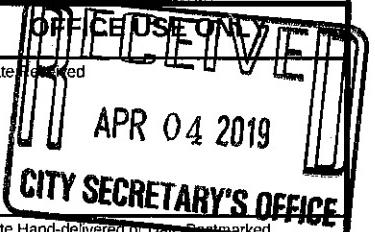


**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID	2 Total pages filed: 17			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Mark	MI	 <small>Date Received</small>			
	NICKNAME	LAST Skinner	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 4100 Oxford Ct			Date Hand-delivered or Date Postmarked			
	Colleyville, TX 76034			Receipt #			
				Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Karen	MI				
	NICKNAME	LAST Deakin	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4828 Lakeside Dr		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	Colleyville, TX 76034						
7 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 399-9885	EXTENSION				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
9 PERIOD COVERED	Month 01/01/2019	Day	Year	Month 03/25/2019	Day	Year	
10 ELECTION	ELECTION DATE Month Day Year 05/04/2019	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special					
11 OFFICE	OFFICE HELD (if any) None			12 OFFICE SOUGHT (if known) Colleyville Mayor			

**GO TO PAGE 2**

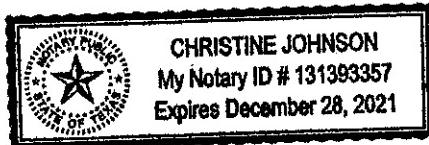
# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 17

13 C / OH NAME	Skinner, Mark		14 Filer ID
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p>		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 440.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 9,090.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 6,345.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 3,744.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 1,000.00

## 17 AFFADAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

R. Mark Skinner  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mark Skinner, this the 4<sup>th</sup> day of April, 2019, to certify which, witness my hand and seal of office.

Christine Johnson  
Signature of officer administering

Christine Johnson  
Printed name of officer administering

Mgmt Asst.  
Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

3 of 17

<b>18 FILER NAME</b> Skinner, Mark	<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b>	
NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,090.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 6,345.30
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/17
2 FILER NAME Skinner, Mark		3 Filer ID
4 Date 02/14/2019	5 Full name of contributor Atherton, Kay & Jay  6 Contributor address; City; State; Zip Code 7207 JOHN MCCAIN RD  COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2019	Full name of contributor Baggett, Malika  Contributor address; City; State; Zip Code 621 CANTERBURY ST  EULESS, TX 76039	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2019	Full name of contributor Calvert, Jimmy  Contributor address; City; State; Zip Code 1704 OAK KNOLL DR  COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/14/2019	Full name of contributor Chatham, Keith  Contributor address; City; State; Zip Code 4413 BOWMAN DR  COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2019	Full name of contributor Davis, Leslie  Contributor address; City; State; Zip Code 101 W MILL VALLEY DR  COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/5 Rpt: 5/17
<b>2</b> FILER NAME Skinner, Mark		<b>3</b> Filer ID
<b>4</b> Date 03/23/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilby, Lee H	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code P.O. BOX 207  BURTON, TX 77835	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 02/20/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Tom	<b>Amount of Contribution (\$)</b> \$100.00
	Contributor address; City; State; Zip Code 1717 AVONDALE DR  COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 02/25/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Carolyn	<b>Amount of Contribution (\$)</b> \$2,000.00
	Contributor address; City; State; Zip Code 109 STOCKMAN TRAIL  GEORGETOWN, TX 78633	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 03/19/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Howe, Mark	<b>Amount of Contribution (\$)</b> \$100.00
	Contributor address; City; State; Zip Code 3100 CARISBROOKE CT  COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 03/07/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jim & Jessica	<b>Amount of Contribution (\$)</b> \$100.00
	Contributor address; City; State; Zip Code 3102 SCARBOROUGH LN W  COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1 Total pages Schedule A1:</b> Sch: 3/5 Rpt: 6/17
<b>2 FILER NAME</b> Skinner, Mark		<b>3 Filer ID</b>
<b>4 Date</b> 03/06/2019	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Johnson, Larry & Alison  <b>6 Contributor address; City; State; Zip Code</b> 3408 LANGLEY HILL LN  COLLEYVILLE, TX 76034	<b>7 Amount of Contribution (\$)</b> \$250.00
<b>8 Principal occupation / Job title (See Instructions)</b>		<b>9 Employer (See Instructions)</b>
<b>Date</b> 02/12/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Lee, Roger  <b>Contributor address; City; State; Zip Code</b> 4901 BELDON TRL  COLLEYVILLE, TX 76034	<b>Amount of Contribution (\$)</b> \$500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 02/14/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Makens, James  <b>Contributor address; City; State; Zip Code</b> 1312 SOMERSET CT  COLLEYVILLE, TX 76034	<b>Amount of Contribution (\$)</b> \$250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 02/25/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Mastagni, Danee  <b>Contributor address; City; State; Zip Code</b> 4108 PEMBROOK PKWY W  COLLEYVILLE, TX 76034	<b>Amount of Contribution (\$)</b> \$250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 02/19/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: McConnell, Melissa  <b>Contributor address; City; State; Zip Code</b> 1717 AVONDALE DR  COLLEYVILLE, TX 76034	<b>Amount of Contribution (\$)</b> \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/17
2 FILER NAME Skinner, Mark		3 Filer ID
4 Date 02/25/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Meek, Karl	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 6204 ROCK DOVE CIRCLE  COLLEYVILLE, TX 76034	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Miller, Louis	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 6404 TALBOT TRAIL  COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Skinner, Jon & Rebecca	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 5200 TOPAZ COURT  FLOWER MOUND, TX 75022	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Skinner, Mary Ann	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code 4100 OXFORD COURT  COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Skinner, Valerie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 4100 OXFORD CT  COLLEYVILLE, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/5 Rpt: 8/17
<b>2</b> FILER NAME Skinner, Mark		<b>3</b> Filer ID
<b>4</b> Date 02/22/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Spivey, Christy  <b>6</b> Contributor address; City; State; Zip Code 3907 MARTIN PKWY  COLLEYVILLE, TX 76034	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/16/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Vallhonrat, Paul  <b>Contributor address; City; State; Zip Code</b> 6510 CONNIE LN  COLLEYVILLE, TX 76034	<b>Amount of Contribution (\$)</b>  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

## LOANS

## SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 9/17
<b>2</b> FILER NAME Skinner, Mark		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 02/12/2019	<b>7</b> Name of lender Skinner, Mark (Mr.)	<input type="checkbox"/> out-of-state PAC (ID#:) _____
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; 4100 Oxford Ct  Colleyville, TX 76034	<b>9</b> Loan Amount (\$) \$1,000.00
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor  .....	<b>19</b> Amount Guaranteed (\$)
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/8 Rpt: 10/17	2 FILER NAME Skinner, Mark	3 Filer ID
4 Date 02/15/2019	5 Payee name 4over	
6 Amount (\$) \$28.58	7 Payee address; City; 5900 San Fernando Rd  Glendale, CA 91202	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 03/11/2019	Payee name Birdwell, Ann-Marie	
Amount (\$) \$300.00	Payee address; City; 10105 Locksley Drive  Benbrook, TX 76126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 02/19/2019	Payee name CampaignShortCuts	
Amount (\$) \$498.83	Payee address; City; 571 Austin Ct  Coppell, TX 75019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Domain Registration and Communications Rental Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/8 Rpt: 11/17	2 FILER NAME Skinner, Mark	3 Filer ID
4 Date 03/13/2019	5 Payee name CampaignShortCuts	
6 Amount (\$) \$571.89	7 Payee address; City; State; Zip Code  571 Austin Ct  Coppell, TX 75019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Application Rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Candidate/Officeholder name	Office sought  Office sought
Date 03/13/2019	Payee name CampaignShortCuts	
Amount (\$) \$1,082.50	Payee address; City; State; Zip Code  571 Austin Ct  Coppell, TX 75019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule). Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Development
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Candidate/Officeholder name	Office held  Office held
Date 03/19/2019	Payee name Checks In the Mail	
Amount (\$) \$19.03	Payee address; City; State; Zip Code  2435 Goodwin Lane  New Braunfels, TX 78135	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Checks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Candidate/Officeholder name	Office sought  Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/8 Rpt: 12/17	2 FILER NAME Skinner, Mark	3 Filer ID	
4 Date 03/04/2019	5 Payee name Designer Graphics		
6 Amount (\$) \$3,058.71	7 Payee address; City; State; Zip Code 12404 Hwy 155 South  Tyler, TX 75703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard and Large Signs	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/15/2019	Payee name Lowe's		
Amount (\$) \$31.26	Payee address; City; State; Zip Code 3000 State Highway 121  Euless, TX 76039		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable Ties for Signs	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/22/2019	Payee name Lowe's		
Amount (\$) \$27.41	Payee address; City; State; Zip Code 3000 State Highway 121  Euless, TX 76039		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable Ties for Signs	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 13/17	2 FILER NAME Skinner, Mark	3 Filer ID	
4 Date 03/13/2019	5 Payee name Shirt-ology		
6 Amount (\$) \$388.35	7 Payee address; City; State; Zip Code 1401 Mary Court  Keller, TX 76262		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name Stripe.com		
Amount (\$) \$3.20	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 02/20/2019	Payee name Stripe.com		
Amount (\$) \$19.75	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Daily Online Donation Collection Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 14/17	2 FILER NAME Skinner, Mark	3 Filer ID	
4 Date 02/25/2019	5 Payee name Stripe.com		
6 Amount (\$) \$7.55	7 Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/03/2019	Payee name Stripe.com		
Amount (\$) \$1.75	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/06/2019	Payee name Stripe.com		
Amount (\$) \$9.01	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 15/17	2 FILER NAME Skinner, Mark	3 Filer ID	
4 Date 03/07/2019	5 Payee name Stripe.com		
6 Amount (\$) \$3.20	7 Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/09/2019	Payee name Stripe.com		
Amount (\$) \$7.55	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/16/2019	Payee name Stripe.com		
Amount (\$) \$3.20	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 16/17	2 FILER NAME Skinner, Mark	3 Filer ID	
4 Date 03/23/2019	5 Payee name Stripe.com		
6 Amount (\$) \$3.20	7 Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 03/24/2019	Payee name Stripe.com		
Amount (\$) \$29.30	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 02/18/2019	Payee name Stripe.com		
Amount (\$) \$1.03	Payee address; City; State; Zip Code 3180 18th St  San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Daily Online Donation Collection Fee</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 17/17	2 FILER NAME Skinner, Mark	3 Filer ID	
4 Date 02/16/2019	5 Payee name Water2Wine Design		
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 168 Weldon Church Road  Bernice, LA 71222		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Graphics	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held